

NASA Academy of Program/Project and Engineering Leadership (APPEL) Participant Nomination Form

Please check the program name and insert the session number for this nomination (refer to the current Agencywide Schedule):

APPEL Level 1 Courses (completion of prerequisites may be required prior to enrollment)

Introduction to NASA – Vision, Missions & Systems

☐ Introduction to Aerospace at NASA VMS 100 _____

Foundations in Engineering, System Engineering & Project Mgmt

☐ Requirements Development & Management FOU 100 _____

☐ Lifecycle, Processes & System Engineering Management FOU 120 _____

☐ Project Planning Analysis and Control FOU 150 _____

☐ NASA's Budgeting Process FOU 160 _____

Communications and Leadership

☐ Technical Writing for the NASA Engineer CL 100 _____

☐ Team Membership CL 150 _____

Risk Management

☐ Foundations of Risk Management RM 100 _____

APPEL Level 2 Courses (completion of prerequisites may be required prior to enrollment)

Level 2 PM #2 (PEM 8) L 2 PM _____

Level 2 PM #3 (PEM 9) L 2 PM _____

Level 2 PM #4 (PEM 10) L 2 PM _____

Introduction to NASA – Vision, Missions & Systems

☐ Science Missions and Systems: Design and Operations VMS 200 _____

☐ Exploration Systems and Human Space Operations VMS 210 _____

☐ Space Launch and Transportation Systems: Design and Ops VMS 220 _____

☐ Introduction to Aeronautics VMS 230 _____

☐ Science Mission and Systems: Design and Ops Laboratory VMS 240 _____

☐ Mars Mission and System Design Laboratory VMS 250 _____

Communications and Leadership

☐ Communicating Technical Issues CL 200 _____

☐ Team Leadership CL 250 _____

☐ Negotiation CL 260 _____

Risk Management

☐ Continuous Risk Management RM 200 _____

Intermediate System Engineering

☐ Concept Exploration – System Engineering Fundamentals ISE 200 _____

☐ Developing and Implementing a System Engineering Mgmt Plan ISE 210 _____

☐ System Verification and Validation ISE 220 _____

☐ Transition, Product Delivery and Mission Operations ISE 230 _____

☐ Decision Analysis ISE 240 _____

Intermediate Project Management

☐ Schedule and Cost Control IPM 200 _____

☐ Earned Value Management Workshop IPM 210 _____

☐ Acquisitions and Contracting at NASA IPM 220 _____

☐ Project Management Laboratory IPM 290 _____

APPEL Level 3 Courses (completion of prerequisites may be required prior to enrollment)

Level 3 PM #1 (PSM 6) L 3 PM _____

Level 3 PM #2 (PSM 7) L 3 PM _____

Level 3 PM #3 (PSM 8) L 3 PM _____

Level 3 PM #4 (PSM 9) L 3 PM _____

Advanced Project Management

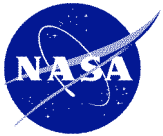
☐ Manage Complex Projects APM 320 _____

☐ Integrated Project Management APM 340 _____

☐ International Project Management APM 350 _____

Completed Forms should be returned to your Center's designated APPEL Training Representative.

Questions? Please call RGI at (703) 820-4900



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Please check the program name and insert the session number for this nomination (refer to the current Agencywide Schedule):

APPEL Electives

- ☐ Innovative Design for Engineering Applications
☐ Introduction to Rapid Prototyping
☐ Performance-based Statement of Work
☐ Seven Axioms of Good Engineering

IDEA _____
I-RP _____
PBSOW _____
SAGE _____

Please complete **ALL** of the following participant information:

I am a ☐ NASA Civil Servant ☐ NASA Contractor ☐ Other (specify) _____

☐ Mr. ☐ Ms. ☐ Dr. Last Name: _____ First: _____ MI: _____

Name to be used on name tag: _____ Phone: _____

Nominee's E-mail: _____ Fax: _____

Functional Position Title (i.e., Chief, XYZ Branch): _____ Mission Directorate: Choose from the drop-down list: (double click)

If more than one Mission Directorate, please list all: _____

Grade: _____ Project Name: _____

Center: Choose from the drop-down list: (double click) Mail Stop: _____

Organization (if non-NASA Civil Servant): _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Gender: ☐ Male ☐ Female Citizenship: ☐ USA ☐ Other: _____ Birth Month/Day: _____

Degree Level: ☐ B.S./B.A. ☐ Masters ☐ Ph.D. ☐ Other: _____

Years of PM Experience: _____ and/or Years of Engineering Experience: _____

Special Dietary, Medical, Physical or other requirements: _____

Supervisor's E-mail: _____

SIGNATURE APPROVALS

Nominee's Signature

Date

Supervisor's Signature

Date

Training Officer's Signature

Date

Est. Travel Travel Approval Signature

Date

Completed Forms should be returned to your Center's designated APPEL Training Representative.

Questions? Please call RGI at (703) 820-4900